


NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number CS22492US												
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450" on: _____ Signature _____ Typed or printed name June Edwards	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">In re Application of</td> <td>DAVID R. HAUB</td> </tr> <tr> <td>Application Number</td> <td>10/630,124</td> </tr> <tr> <td>File Date</td> <td>07/30/2003</td> </tr> <tr> <td>Title</td> <td>CURRENT REDUCTION BY DYNAMIC RECEIVER ADJUSTMENT IN A COMMUNICATION DEVICE</td> </tr> <tr> <td>Art Unit</td> <td>2618</td> </tr> <tr> <td>Examiner</td> <td>TRAN, PABLO N.</td> </tr> </table>		In re Application of	DAVID R. HAUB	Application Number	10/630,124	File Date	07/30/2003	Title	CURRENT REDUCTION BY DYNAMIC RECEIVER ADJUSTMENT IN A COMMUNICATION DEVICE	Art Unit	2618	Examiner	TRAN, PABLO N.
In re Application of	DAVID R. HAUB													
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Examiner	TRAN, PABLO N.													
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.														
The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) \$ <u>500.00</u>														
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ _____														
<input type="checkbox"/> A check in the amount of the fee is enclosed.														
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.														
<input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a Fee Transmittal in duplicate.														
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any over payment to Deposit Account Number 502117, Motorola, Inc. This document is enclosed in duplicate.														
<input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.														
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.														
I am the														
<input type="checkbox"/> applicant/inventor.														
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96)														
<input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>39,633</u>														
<input type="checkbox"/> Attorney or agent acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). _____														
 _____ Signature		SYLVIA CHEN _____ Typed or printed name												
_____ Telephone number		847-523-1096 Telephone number												
_____ Date		30JUNE2006 Date												
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.														
<input checked="" type="checkbox"/> * Total of <u>1</u> forms are submitted.														